

8/A
P. Walker
5-21-03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/088,752
Applicant : Benoit Couet et al.
Filed : 29 July 2002
Int'l Filing Date : 26 October 2000
Title : DOWNHOLE DEPOSITION MONITORING SYSTEM

TC/A.U. : 2856
Examiner : Bellamy, Tamiko D.

Docket N° : 57.0357 US PCT

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450 Alexandria, VA 22313-1450, on

May 9, 2003.

Lorraine Couet

May 9, 2003
Date

AMENDMENT

Honorable Commissioner of Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action of 11 February 2003, please amend the above-identified application and enter the remarks as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 7 of this paper.

TECHNOLOGY CENTER 2800

MAY 15 2003

RECEIVED

05/13/2003 WABDELRI 00000132 190615 10088752

01 FC:1202 234.00 CH



PATENT

2856
\$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/088,752
Applicant : Benoit Couet et al.
Filed : 29 July 2002
Int'l Filing Date : 26 October 2000
Title : DOWNHOLE DEPOSITION MONITORING SYSTEM

TC/A.U. : 2856
Examiner : Bellamy, Tamiko D.

Docket N° : 57.0357

RECEIVED
MAY 15 2003
TECHNOLOGY CENTER 2800

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Hon. Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

Lorraine Ronnlund
Lorraine Ronnlund

May 9, 2003
Date

FEE FOR CLAIMS

HONORABLE COMMISSIONER FOR PATENTS

P. O. Box 1450

Alexandria, VA 22313-1450

Sir:

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	Other Than A Small Entity	
	Claims Remaining After Amendment		Highest Number Previously Pd. For	Present Extra	Rate	Addit. Fee
Total	38	Minus	25	13	(over 20) x \$18.00=	\$ 234.00
Indep.	3	Minus	3	0	(over 3) x \$84.00=	\$
[] First Presentation of Multiple Depend. Claim					+ 280.00	\$ 234.00
TOTAL ADDIT. FEE						\$ 234.00

[] No additional fee for claims is required.


[X] Total additional fee for claims required \$ 234.00.



Applicant(s) authorize(s) the Commissioner to charge **Deposit Account N°. 19-0615 \$234.00** to cover the fees that may be required under 37 C.F.R. §1.16. Should this amount be incorrect, Applicant(s) authorize(s) the Commissioner to charge or credit any deficiency/overpayment to Deposit Account N°. 19-0615.

Two copies of this transmittal letter are enclosed for PTO accounting use.

Respectfully submitted,

By: 
William B. Batzer
Registration N° 37,088

Schlumberger-Doll Research
36 Old Quarry Road
Ridgefield, Connecticut 06877-4108
(203) 431-5505

Date: May 9, 2003

RECEIVED
MAY 15 2003
TECHNOLOGY CENTER 2800